## REMARKS

Claims 3 and 5-8 remain in the application.

On page 5 of the Office action, the Examiner provides a response to arguments. According to the Examiner, the claims directed to an apparatus must be distinguished from the prior art in terms of structure rather than function.

In a previous response, the Applicants have clearly emphasized that the medullary caliper of Ellis is strictly limited to being used to measure a width of the intramedullary canal and a depth of insertion. The medullary caliper of Ellis is not described as being usable in any way with a computer-assisted surgery system. The caliper of Ellis is strictly a mechanical device.

As for Brosseau, the Applicants acknowledge that Brosseau teaches computer-assisted surgery. However, the present application clearly teaches and now claims the use of a apparatus to obtain an axis of an intramedullary canal for its subsequent tracking. Accordingly, combination claim 3 now features limitations pertaining to a user interface that produces data related to an axis of the intramedullary canal, which axis is obtained from the insertion of the apparatus in the intramedullary canal, and from a tracking of the detectable device on the apparatus. This is not taught in any way by Ellis or Brosseau. Both these references fail to teach the insertion of a tool inside the intramedullary canal to provide an output related to a tracking of the axis of the intramedullary canal. This concept, now in the form of a structural limitation, is simply not taught by the prior-art references.

## Commissioner for Patents

In view of the above amendments and remarks, this application is considered to be in condition for allowance, and early notice to that effect is earnestly solicited.

Respectfully submitted, Herbert Andre JANSEN et al. By:

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